EV336517894US

DCT	For	r receiving Office use only	
PCI			
Control of the Contro	International Application No.		
REQUEST			
, reguest	International Filing Da	te	
The undersigned requests that the present international application be processed	Name of the last		
according to the Patent Cooperation Treaty.	Name of receiving Off	ice and "PCT International Application"	
	Applicant's or agent's (if desired) (12 charges	file reference ers maximum) 208690/FV/mw	
Box No. 1 TITLE OF INVENTION Inrichting voor opslag van vervoermiddelen			
Box No. II APPLICANT This person	n is also inventor		
Name and address: (Family name followed by given name: for a legal em The address must include postal code and name of country. The country of Bax is the applicant's State (that is, country) of residence if no State of residen	the coldenes tendines and to obtain	Tolephone No.	
Johan van Croonenborgh		Pacsimile No.	
Oostmaaslaan 672			
3063 DJ ROTTERDAM		Teleprinter No.	
The Netherlands			
	·	Applicant's registration No. with the Office	
State (that is, country) of nationality:	State (that is, country)	of residence:	
Netherlands	Netherlands		
This person is applicant all designated all designated	d States except	the Late of Court of the Court	
for the purposes of:	d States except tales of America	the United States of America only the States indicated in the Supplemental Box	
for the purposes of:    States   the United S   Box No. III   FURTHER APPLICANT(S) AND/OR (FURT		of America only the Supplemental Box	
for the purposes of:  Box No. UI FURTHER APPLICANT(S) AND/OR (FURT	HER) INVENTOR(S)	of America any the Supplemental Box	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entire address must include noted order and name of country. The country of	HER) INVENTOR(S)	of America any the Supplemental Box  This person is:	
for the purposes of:  Box No. UI FURTHER APPLICANT(S) AND/OR (FURT	HER) INVENTOR(S)	of America any the Supplemental Box	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entire address must include noted order and name of country. The country of	HER) INVENTOR(S)	of America any the Supplemental Box  This person is:	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entire address must include noted order and name of country. The country of	HER) INVENTOR(S)	This person is:    Bpplicant only   applicant only   inventor only   this check-har	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entire address must include noted order and name of country. The country of	HER) INVENTOR(S)	This person is:  Experimental Box  This person is:  Experiment only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entire address must include noted order and name of country. The country of	HER) INVENTOR(S)	This person is:    Bpplicant only   applicant only   inventor only   this check-har	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal em The address must include postal code and name of country. The country of the day is the applicant's State (that is, country) of residence if no State of resident	HER) INVENTOR(S)  Ity, full official designation, the address indicated in this ce is indicated in this ce is indicated below.)	This person is:  Explicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entire address must include noted order and name of country. The country of	HER) INVENTOR(S)	This person is:  Explicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name: for a legal en The address must include postal code and name of country. The country of Box is the applicant's State (that is, country) of residence if no State of residence is the applicant of the state (that is, country) of residence is no State (that is, country) of nationality:	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except	This person is:  Bpplicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Offico  of residence:	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name: for a legal en The address must include postal code and name of country. The country of Box is the applicant's State (that is, country) of residence if no State of residence is the applicant of the state (that is, country) of residence is no State (that is, country) of nationality:	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except inters of America	This person is:  applicant only  applicant end inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Offico of residence:	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name: for a legal ent The address must include postal code and name of country. The country of the applicant is State (that is, country) of residence if no State of residence is the applicant is state (that is, country) and all designated for the purposes of:  all designated the United States	HER) INVENTOR(S)  In, full official designation the address indicated in this ce is indicated below.)  State (that is, country)  d States except tates of America	This person is:  Bpplicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Offico of residence:  the United States the States indicated in the Supplemental Box	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal end The address must include postal code and name of country. The country of Box is the applicant's State (that is, country) of rustidence if no State of residence is no State of residence if no State of residence is a state of residence if no State of residence is a state of residence in the United States.  This person is applicant and/or (further) inventors are indicated of Further applicants and/or (further) inventors are indicated of the United States.	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except taxes of America  on a continuation sheet.	This person is:  Bpplicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Offico of residence:  the United States the States indicated in the Supplemental Box	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entitle address must include postal code and name of country. The country of Box is the applicant's State (that is, country) of residence if no State of residence is no State of residence if no State of residence is no State of the United States  This person is applicant and/or (further) inventors are indicated of the purposes of:  Box No. IV AGENT OR COMMON REPRESENTATIVE  Tho person identified below is hereby/has been appointed to act of the applicant(s) before the competent International Authorities  Name and address: (Family name followed by the page of the lead of the property of the competent International Authorities	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except tates of America  on a continuation sheet.  GOR ADDRESS FOR  on behalf as:	This person is:  Bpplicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Offico of residence:  the United States the States indicated in the Supplemental Box  CORRESPONDENCE  agent Common representative  Telephone No.	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entre address must include postal code and name of country. The country of Box is the applicant's State (that is, country) of residence if no State of residence is a state (that is, country) of nationality:  This person is applicant and/or (further) inventors are indicated of the purposes of:  Box No. IV AGENT OR COMMON REPRESENTATIVE  Tho person identified below is hereby/has been appointed to act of the applicant(s) before the competent International Authorities	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except tates of America  on a continuation sheet.  GOR ADDRESS FOR  on behalf as:	This person is:  Bpplicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Offico  of residence:  the United States of America only  CORRESPONDENCE  agent common representative  Telephone No. +31 40 243 3715	
States the United S Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal ent The address must include postal code and name of cauntry. The country of Box is the applicant's State (that is, country) of residence if no State of residence  State (that is, country) of nationality:  This person is applicant all designated the United S Further applicants and/or (further) inventors are indicated of The person identified below is hereby/has been appointed to act of the applicant(s) before the competent International Authorities  Name and address: (Family name followed by given name; for a legal ent The address must include postal code and name of or Dohmen, Johannes Maria Gerardus Algemeen Octrooi- en Merkenbureau	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except tates of America  on a continuation sheet.  GOR ADDRESS FOR  on behalf as:	This person is:  Bpplicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Offico  of residence:  the United States of America only  CORRESPONDENCE  agent common representative  Telephone No. +31 40 243 3715  Facsimile No.	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entitle address must include postal code and name of caunity. The country of Box is the applicant's State (that is, country) of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence in the United State of the purposes of:  The purposes of:  Box No. IV AGENT OR COMMON REPRESENTATIVE  The person identified below is hereby/has been appointed to act to of the applicant(s) before the competent International Authorities of the applicant(s) before the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except tates of America  on a continuation sheet.  GOR ADDRESS FOR  on behalf as:	This person is:    Bpplicant only   Supplemental Box	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entitle address must include postal code and name of cauntry. The country of Box is the applicant's State (that is, country) of rustidence if no State of resident for the purposes of:  This person is applicant and/or (further) inventors are indicated of the purposes of:  States  Further applicants and/or (further) inventors are indicated of the applicant identified below is hereby/has been appointed to act to of the applicant(s) before the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the applicant (s) before the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle postal code and name of competent and code and name of code and code a	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except tates of America  on a continuation sheet.  GOR ADDRESS FOR  on behalf as:	This person is:  Bpplicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Offico  of residence:  the United States of America only  CORRESPONDENCE  agent common representative  Telephone No. +31 40 243 3715  Facsimile No.	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entitle address must include postal code and name of caunity. The country of Box is the applicant's State (that is, country) of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence if no State of residence is no State of residence in the United State of the purposes of:  The purposes of:  Box No. IV AGENT OR COMMON REPRESENTATIVE  The person identified below is hereby/has been appointed to act to of the applicant(s) before the competent International Authorities of the applicant(s) before the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the competent International Authorities Name and address: (Family name followed by given name; for	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except tates of America  on a continuation sheet.  GOR ADDRESS FOR  on behalf as:	This person is:    Bpplicant only   Supplemental Box	
for the purposes of:  Box No. III FURTHER APPLICANT(S) AND/OR (FURT Name and address: (Family name followed by given name; for a legal entitle address must include postal code and name of cauntry. The country of Box is the applicant's State (that is, country) of rustidence if no State of resident for the purposes of:  This person is applicant and/or (further) inventors are indicated of the purposes of:  States  Further applicants and/or (further) inventors are indicated of the applicant identified below is hereby/has been appointed to act to of the applicant(s) before the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle of the applicant (s) before the competent International Authorities Name and address: (Family name followed by given name; for a legal entitle postal code and name of competent and code and name of code and code a	HER) INVENTOR(S)  Ity, full official designation the address indicated in this ce is indicated in this ce is indicated below.)  State (that is, country)  d States except tates of America  on a continuation sheet.  GOR ADDRESS FOR on behalf as:	This person is:  Bpplicant only  applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Offico of residence:  the United States the States indicated in the Supplemental Box  CORRESPONDENCE  agent Common representative  Telephone No. +31 40 243 3715  Facsimile No. +31 40 243 4557  Teleprinter No.  Agent's registration No. with the Office	

Form PCT/RO/101 (first sheet) (March 2001; reprint January 2003)

7: 5.9

Sheet No. .

Continuation of Box No. 1V AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

Van kan, Johan Joseph Hubert

Veldman-Dijkers, Cornelia Geerdina Catharina

Dorna, Peter

Blokland, Arie

Vollebregt, Cornelis Jacobus

Valkonet, Rutger

Piot, Etienne Louis Christiaan

Algemeen Octrooi- en Merkenbureau P.O. Box 645 5600 AP EINDHOVEN The Netherlands

Form PCT/RO/101 (communion sheet) (January 1999)

	· .	Sheet No			
Continuation of Box No.	III FURTHER	applicant(s) a	ND/OR (FURTH	IER) I	INVENTOR(S)
If none of the following s	ub-boxes is used, th	is sheet should not	be included in th	ne requ	uest.
Name and address: (Family The address must include posit Box is the applicant's State (the	al code and name of cou	and The mountain of the	e politica es indicator la	th(x	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office
State (that is, country) of the	ationality:	· . ·	Smite (that is, co	untry)	of residence:
This person is applicant for the purposes of:	all designated States	all designated the United Sto	States except les of America		he United States the States indicated in the Supplemental Box
Name and address: (Faml) The address must include posts Box is the applicant's State (tha	name followed by given al code and name of cou a le, country) of residence	name; for a legal entif any. The country of the aff na State of residence	), full (fficial designa address Indicated in to Indicated below.)		This person is:  applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office
State (that is, country) of n	ationality:		State (that is, co	(עיסומא	of residence:
					15 S.
This person is applicant for the purposes of:	al) designated States	all designated the United Sur	States except		ne United States of America only the States indicated in the Supplemental Box
Name and address: (Fomily The address must include posts Bux is the applicant's State (the	ai code and name of cour	NOV. The asymptom of the	e addresse indicated is	tion. 1 this	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)
	•	•		-	Applicant's registration No. with the Office
State (that is, country) of n	ationality:		State (that is, con	(ניסוסו)	of residence:
This person is applicant	all designated	ell derieussed	<u> </u>		Market State of the State of th
for the purposes of:	States	all designated the United Sta	ics of America		he United States only the States indicated in the Supplemental Box
Name and address: (Family The address must include posis Box is the applicant's State (the	ui cade and rume of cau	ntry. This conjuntry of the	coddress indicated b	titis	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office
State (that is, country) of n	ationality:		State (that is care	mtnu) a	of recidence:
	en energy,	* 1. * **	State (that is, con	nury) C	PL FEMILETICS:
This person is applicant for the purposes of:	all designated States	all designated the United Sto	States except tes of America		ne United States the States indicated in f America only the Supplemental Box
Further applicants a	nd/or (further) invent	tors are indicated or	n another continua	tion s	neet.

Form PCT/RO/101 (continuation sheet) (March 2001; reprint January 2003)



· Sheet No. ......

Box No. V DESIGNATION OF STATES	Mark the applicable check-boxes below	at least one must be marked.	
The following designations are hereby made under Rule 4.9(a):			
Regional Patent			
AP ARIPO Patent: GH Ghana, GM	Gambia KR Kenya I.S Lesotha MW	Malani M7 Mozambiana SD Cudan	
SL Sierra Leone, SZ Swaziland, TZ U	nited Republic of Tanzania, UG Uganda, 3	ZM Zamhia ZW Zimbahwa and my other	
State which is a Contracting State of	the Harare Protocol and of the PCT (No	her kind of protection or treatment desired.	
EA Eurasian Patent: AM Armenia, AZ			
RU Russian Federation, TJ Tajikistan Patent Convention and of the PCT	, TM Turkmenistan, and any other State w	thich is a Contracting State of the Eurasian	
EP European Patent: AT Austria, BE Be	figium BGRulgaria CH&LISwitzertan	d and Liaghtantian CV Change C2 Cook	
Republic, DE Germany, DK Denmar	k, EE Estonia, ES Spain, FR Finland, FR 1	France, GR United Kingdom, GR Greece	
IE Iroland, IT Italy, LU Luxembourg,	MC Monaco, NL Netherlands, PT Portug	al. SE Sweden. SI Slovenia SK Slovekia -	
TR Turkey, and any other State which	is a Contracting State of the European Pa	tent Convention and of the PCT	
OA OAPI Patent: BF Burkina Faso, BJ	Benin, CF Central African Republic, CG	Congo, CI Côte d'Ivoire, CM Cameroon,	
GA Gabon, GN Guinea, GQ Equator	ial Guinea, GW Guinea-Bissnu, ML Mali	MR Mauritania, NE Niger, SN Senegal,	
of protection or treatment derived the	ite which is a member State of OAPI and a lifty on dotted line)	Contracting State of the PCT (if other land	
		• • • • • • • • • • • • • • • • • • • •	
National Patent (if other kind of protection or		_	
AE United Arab Emirates:	GM Gambia	NZ New Zealand	
AG Antigua and Barbuda	HR Croatia	OM Omen	
AL Albania	HU Hungary	PH Philippines	
AM Armenia	ID Indonesia	PL Poland	
AND AND AUSTRIA	IL Israel	PT Portugal	
AZ Aresheller	IN India	RO Romania	
AZ Azerbaijan	IN ICEIAND	RU Russian Federation	
BA Bosnia and Herzegovina	KE Kenya		
BG Bulgaria	VC Vummertee	SC Seychelles	
BR Brazil	KP Democrate Bronie's Beautile	M SD Sudan	
BY Belanis	of Kores	M SC Signature	
BZ Belize.	KR Republic of Kores	M SK Simplin	
CA Canado	KZ Kazakhstan	SL Sierra Leone	
CA Canado ,	LC Saint Lucia	TI Talibistan	
CIV CIIIIIII	LK Sri Lanka	TM Turkmenisten	
CO Colombia	LR Liberia	TN Tunicia	
CR Costo Rica	LS Lesotho	TN Tunisia. TR Turkey	
CU Cuba	LT Lithuania	TT Trinidad and Tobago	
CZ Czech Republic	TTI Cincentherror		
DE Germany DK Denmark	LV Latvia	TZ United Republic of Tanzania	
DK Denmark	MA Marocco	UA Ukraine	
LAL DM Dominica	MD Republic of Moldova	UG Uganda	
DZ Algeria		US United States of America	
EC Ecuador	MG Madagascar		
EE Estonia	MK The former Yugoslav Republic of	UZ Uzbekistan	
ES Spain		VC Saint Vincent and the Grenadines	
GB United Kingdom	MN Mongolia	VN Viet Nam	
	MWMslaw)	YU Yugoslavia,	
GD Grenado GE Georgia	MX Mexico	ZA South Africa	
an diame	NO NOTWBY	ZW Zimbabwe	
Check-boxes below reserved for designating Sta	tes which have become party to the PCT at	fter issuance of this sheet	
I Juli Micaladne		<b>m</b> ***	
		<b>a</b>	
Precoutionary Designation Statement: In ad			
other designations which would be permitted up	nder the PCT except any designation(s) in	dicated in the Supplemental Box as being	
excluded from the scope of this statement. The an	plicant declares that those additional design	nations are subject to confirmation and that	
any designation which is not continued before the	to expiration of 15 months from the priority	date is to be reported or withdrawn by the	
applicant at the expiration of that time limit. (Co.	nfirmation (including fees) must reach the rec	eiving Office within the 15-month time limit.)	

Form PCT/RO/101 (second sheet) (January 2003)

	S	heet No			
Box No. VI PRIORITY	CLAIM				
The priority of the following	g earlier application(s) is herei	by claimed:			
Filing date Number Where earlier application is:				ı is:	
of earlier application (day/month/year)	of earlier application	national application: country or Member of WTO	regional application:* regional Office	international application receiving Office	
item (1) 20 september 2002	1021501	The Netherlands	1000		
item (2)					
item (3)					
item (4)					
item (5)				: :	
Further priority claims	are indicated in the Supplemen	ntal Box.			
Box No. VII INTERNAT  Choice of International Ses international search, indicate  ISA / EP  Request to use results of en International Searching Authority Date (day/month/year)	on is an ARIPO application, in ambor of the Warld Trade Organization of the Warld Trade Organization of the Warld Trade Organization of the Authority chasen: the two-trier search: reference to the	HORITY  or more International Seletter code may be used):	party to the Paris Conve earlier application was fil earching Authorities are	milon for the Protection of ed (Rule 4.10(b)(ii))	
September 20, 2002	SN 400	605	The Netherlands		
Box No. VIII DECLARAT	TIONS				
The following declarations check-baxes below and indicate	are contained in Boxes Nos. I are in the right column the number	VIII (I) to (v) (mark the ap ber of each type of declard	oplicable vion):	Number of declarations	
Box No. VIII (i)	Declaration as to the identity	of the inventor			
Box No. VIII (ii)	Declaration as to the applicate, to apply for and be grant	ant's entirlement, as at the anted a patent	international filing	en e	
Box No. VIII (lii)	Declaration as to the applic date, to claim the priority of	ant's entitlement, as at the factor of the earlier application	no international filing	Andrew State of the State of th	
Box No. VIII (iv)	Declaration of inventorship United States of America)	(only for the purposes of	the designation of the	:	
Box No. VIII (v)	Declaration as to non-prejud	dicial disclosures or excep	ntions to lack of novelty.		

Form PCT/RO/101 (third sheet) (July 2002; reprint January 2003)

- Parker S. C. C.	Sheet No			
Box No. IX CHECK LIST; LANGUAGE				
This international application contains:  (a) in paper form, the following number of sheets:  request (including declaration sheets):  description (excluding sequence listings and/or tables related thereto):  claims  abstract:  drawings  Sub-total number of sheets:  O sequence listings  tables related thereto  (for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form;  see (c) below)  Total number of sheets:  O  (b) only in computer readable form (Section 801(a)(i))  (i) sequence listings  (ii) tables related thereto  (c) also in computer readable form (Section 801(a)(i))  (i) sequence listings  (ii) tables related thereto  Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained tho  sequence listings:  tables related thereto:	This international application is accompanied by the following item(s) (mark the applicable check-baxes below and indicate in right column the mumber of each item):  1.  fee calculation sheet  2. original separate power of attorney  3. original general power of attorney; reference number, if any:  5. statement explaining lack of signature  6. priority document(s) identified in Box No. VI as item(s):  7. translation of international application into (language):  8. separate indications concerning deposited microorganism or other biological material  9. sequence listings in computer readable form (Indicate type and number of carriers)  (i) copy submitted for the purposes of international search under Rule 13 ter only (and not as part of the international applicatio diditional copies including, where applicable, the copy for the purposes of International search under Rule 13 ter  (iii) cogether with relevant statement as to the identity of the copy of copies with the sequence listings mentioned in left column tables in computer readable form related to sequence listings (indicate type and number of carriers)  (i) copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)  (ii) copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)  (iii) can where check-box (b)(ii) or (c)(ii) is marked in left column additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater)  (iii) copy submitted for the purposes of international search under Section 802(b-quater)  (iii) capther with relevant statement as to the identity of the copy of the purposes of international search under Section 802(b-quater)  (iii) capther with relevant statement as to the identity of the copy of the purposes of international search under Section 802(b-quater)	n):		
(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)	11. a other (specify):	:		
Figure of the drawings which should accompany the abstract:	Language of filing of the international application:	<del></del>		
Box No. X SIGNATURE OF APPLICAN.	T, AGENT OR COMMON REPRESENTATIVE ning and the capacity in which the person rigns (if such capacity is not obvious from reading	<del></del>		
The state of the feet state of	nue, and the sequence in which the person alone (it alon capacity is not obvious from reading	ine request).		
38	For receiving Office use only			
Date of actual receipt of the purported international application:	2. Draw	٠		
<ol> <li>Corrected date of actual receipt due to later be timely received papers or drawings complete the purported international application:</li> </ol>	mt i garage de la companya del companya del companya de la company	eíved;		
Date of timely receipt of the required corrections under PCT Article 11(2):	not	received:		
5. International Searching Authority (if two or more are competent): ISA /	6. Transmittel of search copy delayed until scarch fee is paid	·		
For International Bureau use only				
Date of receipt of the record copy by the International Bureau:				
Form PCT/RO/101 (last sheet) (January 2003)				